



Deval L. Patrick, Governor
Timothy P. Murray, Lt. Governor
Richard A. Davey, Secretary & CEO
Rachel Kaprielian, Registrar



Attachment D

MREP Personal Contact Information Change Form

Effective as of _____ please change my address to the following:

month / day / year

Name: _____

Street Address: _____

Mailing Address: _____

City/State/Zip: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

FAX: _____

E-mail: _____

Please mail or fax this form to:

Registry of Motor Vehicles

Program Coordinator - MREP

165 Liberty Street

Springfield, MA. 01103

FAX 1-413-736-9873

E-mail: MREP@.State.MA.US

NOTE: You must also notify the MSF of this address change.